



EXPRESS MAIL NO. EV335394385US

**TRANSMITTAL
FORM***(To be used for all correspondence
after initial filing)*

Application Number	10/670,762
Filing Date	September 25, 2003
First Named Inventor	Francesco Pappalardo
Art Unit	2819
Examiner Name	Jean Bruner Jeanglaude
Attorney Docket No.	851763.440

ENCLOSURES (check all that apply)

- | | | |
|--|--|---|
| <input checked="" type="checkbox"/> Fee Transmittal Form
<input checked="" type="checkbox"/> Fee Attached
<input checked="" type="checkbox"/> Amendment/Response
<input type="checkbox"/> After Final
<input type="checkbox"/> Affidavits/declaration(s)
<input type="checkbox"/> Extension of Time Request
<input type="checkbox"/> Express Abandonment Request
<input type="checkbox"/> Information Disclosure Statement; Form PTO-1449
<input type="checkbox"/> Cited References
<input type="checkbox"/> Certified Copy of Priority Document(s)
<input type="checkbox"/> Response to Missing Parts under 37 C.F.R. 1.52 or 1.53
<input type="checkbox"/> Response to Missing Parts/Incomplete Application | <input type="checkbox"/> Drawing(s)
<input type="checkbox"/> Request for Corrected Filing Receipt
<input type="checkbox"/> Licensing-related Papers
<input type="checkbox"/> Petition
<input type="checkbox"/> Petition to Convert to a Provisional Application
<input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address
<input type="checkbox"/> Declaration
<input type="checkbox"/> Statement under 37 CFR 3.73(b)
<input checked="" type="checkbox"/> Terminal Disclaimer
<input type="checkbox"/> Request for Refund
<input type="checkbox"/> CD, Number of CD(s) _____
<input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Appeal Communication to TC (<i>Appeal Notice, Brief, Reply Brief</i>)
<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Return Receipt Postcard
<input type="checkbox"/> Other Enclosure(s) (<i>please identify below</i>):

_____ |
|--|--|---|

Remarks**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm Name	Seed Intellectual Property Law Group PLLC	Customer Number	00500
Signature			
Printed Name	Timothy L. Boller		
Date	February 3, 2005	Reg. No.	47,435

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Signature	***SENT VIA EXPRES MAIL***		
Typed or printed name		Date:	

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

558422_1.DOC